

UTILITY SERVICE APPLICATION

City of Bonners Ferry

7232 Main Street

P.O. Box 149

Bonnors Ferry, ID 83805 208-267-3105

WO # _____

Application Number: _____

<input type="checkbox"/> NEW <input type="checkbox"/> UPGRADE EXISTING <input type="checkbox"/> NEW METER EXISTING BASE <input type="checkbox"/> RETIREMENT OF EXISTING	<input type="checkbox"/> ELECTRIC <input type="checkbox"/> WATER <input type="checkbox"/> SEWER <input type="checkbox"/> GARBAGE
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1. Customer: _____
2. Co-Customer: _____
3. Mailing Address: _____
4. SSN Number: _____

5. Phone: _____ Cell: _____
6. Physical Address of Project: _____

I agree to pay for utility services from the City of Bonners Ferry in accordance with current utility policies, rates and regulations.

8. Signature of Customer: _____ Date: _____

9. Property Owner (if different than above): _____

Address: _____ Telephone: _____

I agree to allow the City Utility Departments ingress to the water/sewer line, power line and/or service line over, under, across, or through my property and adequate working area immediately adjacent thereto as required during construction and in the future for maintenance and/or repair.

I accept the above conditions and the City of Bonners Ferry Utility Policy.

10. Signature of Property Owner _____ Date: _____

11. Building Permit: ☐ Yes ☐ No

If Yes: ☐ City of BF ☐ City of Moyie Springs ☐ Boundary County

12. Type of Service Requested: ☐ Residential ☐ Multi-family ☐ Mobile/Manufactured Home
☐ Commercial ☐ Industrial ☐ Other _____

13. Description of Service:

Electric: ☐ 120V/240V ☐ Other** _____
☐ 1-Phase ☐ Other** _____ Service Size: _____ Amps

Water: ☐ 1 inch ☐ Other

Sewer: ☐ 4 inch ☐ Other

Garbage: ☐ Residential ☐ Commercial/Industrial

****A VOLTAGE AND LOAD STUDY IS REQUIRED WITH THIS APPLICATION FOR COMMERCIAL SERVICES**

14. Heat Type: ☐ Electric ☐ Gas ☐ Oil ☐ Propane ☐ Wood

If electric: ☐ Furnace ☐ Baseboard ☐ Other Total Wattage _____ (KW)

15. Wired by: ☐ Homeowner ☐ Licensed Contractor (name) _____

**** Idaho State Electrical Permit and Inspection is Required****

16. Sewer: ☐ City of Bonners Ferry ☐ Septic

17. Water: ☐ City of Bonners Ferry ☐ Well

18. Water/Sewer Contractor:

Water/Sewer Contractor: _____ Telephone: _____

*****ALL APPLICATIONS ARE SUBJECT TO CITY UTILITY DEPARTMENTS REVIEW AND APPROVAL*****

*****FOR OFFICIAL USE ONLY*****

Application Received By: _____ Date Received: _____

Electric Construction Deposit: _____
Electric Connect Fees: _____
Water Tap Fee: _____
Water Connect Fees: _____
Sewer Tap Fee: _____
Utility Security Deposits: _____
Transformer Fee: _____

TOTAL _____

Date Paid: _____ Cash _____ Check #: _____ Other _____
Rec'd by: _____

Approvals: INITIALS DATE
Admin: _____
City Engineer: _____

Construction Completed:
Electric: _____
Water & Sewer: _____
Metering: _____

Electric Meter Number: _____
Water Meter Number: _____

BILLING OFFICE NOTIFICATION FOR BILLING AND SERVICE TO:

AVISTA(Spokane): Date: _____ By _____

BF Garbage: Date: _____ By _____